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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/760,634-Conf. #8269 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL January 20, 2004 Filing Date Gregory E. Sancoff First Named Inventor **For FY 2008 Examiner Name** D. D. Yabut Applicant claims small entity status. See 37 CFR 1.27 3734 Art Unit TOTAL AMOUNT OF PAYMENT D0188.70165US02 1,050.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check x Credit Card None Money Order Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Utility 310 155 510 255 210 105 Design 210 105 100 50 130 65 Plant 210 105 310 155 160 80 310 Reissue 155 510 255 620 310 Provisional 210 105 0 0 n 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims** Fee Paid (\$) **Extra Claims** Fee (\$) **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets Extra Sheets** Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,050.00 SUBMITTED BY Registration No. Signature 52,078 Telephone 617.646.8000 Name (Print/Type) Walt Norfleet Date August 4, 2008

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: August 4, 2008